



State of New Jersey
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS
124 HALSEY STREET, 6TH FLOOR, P.O. Box 45006
NEWARK, NEW JERSEY 07101
(973) 504-6410

Application for Telecommunications Wiring Exemption

Adopted Amendment: N.J.A.C. 13:31-1.11, effective date: January 6, 1993
Adopted New Rule: N.J.A.C. 13:31-1.17, effective date: February 16, 1993

(Please print or type.)

1. _____
Name of applicant / responsible representative **and** name of business

Street address (principal place of business) City State ZIP Code

Telephone number (include area code)

2. Type of business (check one)

☐ a. Individual
Proprietorship

☐ b. Partnership

☐ c. Corporation

Date of formation

Date of partnership

Date of incorporation

State of incorporation

A copy of the Trade Name Certificate must be attached if the business name is other than that of the applicant of the corporation, or a copy of the corporation papers filed with the N.J. Department of the Treasury, Division of Commercial Recording, must be attached.

If this is a foreign corporation, submit evidence that it is registered to do business in the State of New Jersey.

If more than one year has passed since the date the Certificate of Authorization to do business in New Jersey or the corporation papers were filed, include a Certificate of Good Standing.

3. For individual proprietorship:

Owner (Name in full)

Home street address City State ZIP Code

Date of birth Home telephone number (include area code)

Are you a U.S. citizen? ☐ Yes ☐ No If "No," attach proof of legal work status.

4. Partnership:

Partner-in-charge (Name in full)

Home street address City State ZIP Code

Date of birth Home telephone number (include area code)

Is the partner-in-charge a U.S. citizen? ☐ Yes ☐ No If "No," attach proof of legal work status.

List all other partners (Use additional paper if necessary.)

Partner (Name in full)		Title	
Home street address	City	State	ZIP Code

Date of birth		Home telephone number (include area code)	
Is the partner a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If “No,” attach proof of legal work status.	

Partner (Name in full)		Title	
Home street address	City	State	ZIP Code

Date of birth		Home telephone number (include area code)	
Is the partner a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If “No,” attach proof of legal work status.	

Partner (Name in full)		Title	
Home street address	City	State	ZIP Code

Date of birth		Home telephone number (include area code)	
Is the partner a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If “No,” attach proof of legal work status.	

5. Corporation:

Registered agent of the corporation (Name in full)		Title	
Home street address	City	State	ZIP Code

Date of birth		Home telephone number (include area code)	
Is the registered agent of the corporation a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If “No,” attach proof of legal work status.	

List all other corporate officers (Use additional paper if necessary.)

Corporate officer (Name in full)		Title	
Home street address	City	State	ZIP Code

Date of birth		Home telephone number (include area code)	
Is the corporate officer a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If “No,” attach proof of legal work status.	

Corporate officer (Name in full)		Title	
Home street address	City	State	ZIP Code

Date of birth		Home telephone number (include area code)	
Is the corporate officer a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If “No,” attach proof of legal work status.	

Corporate officer (Name in full)

Title

Home street address

City

State

ZIP Code

Date of birth

Home telephone number (include area code)

Is the corporate officer a U.S. citizen? ☐ Yes ☐ No If "No," attach proof of legal work status.

6. Has any member of the business entity been convicted of a crime, or has any member of the business entity ever entered a plea (other than innocent) to an alleged crime under federal or state law? (Do not include minor traffic offenses.)
☐ Yes ☐ No If your answer to question 6 is "Yes," please explain. (Use additional paper if necessary.)

7. The applicant certifies to the following: N.J.A.C. 13:31-1.17 (c)

1. The full name and address of the applicant together with the nature of the business entity (for example, corporation, partnership or individual proprietorship) and the names and addresses of the owners, partners and/or officers of the entity;
2. A certification that the applicant is familiar with and is in full compliance with Part 68 of the Federal Communications Commission regulations (47 C.F.R. section 68.1 et seq.) concerning wiring and any other applicable Federal regulation;
3. A certification that the applicant is familiar with and will comply with the applicable National Electrical Code provision requirements, including, but not limited to Article 800 (communication circuits) and the regulations of the New Jersey Department of Community Affairs and that the applicant will be responsible for obtaining any required local permits and inspections for all work;
4. A certification that the applicant shall not perform the following work unless or until an electrical contractor's business permit is obtained from the Board:
 - i. Wiring defined by the National Electrical Code as service conductors (the supply conductors that extend from the main or transformers to the service equipment of the premises supplied, feeder (all conductors between service equipment or the source of a separately derived system and the final branch-circuit overcurrent device), and branch circuit (the connection between the final overcurrent device protecting the circuit and the outlet/appliance). Wiring between power supplies integral with telecommunication equipment and the telecommunication equipment is not intended to be prohibited;
 - ii. Telecommunications wiring from telecommunications equipment to power operated controlled equipment; or
 - iii. Installation of work in hazardous/classified areas as defined by Article 500 of the National Electrical Code. Classified areas are those in which hazardous liquids, vapors, gases, dusts and fiber are normally present (Division 1 locations) or may be present due to maintenance or equipment malfunction (Division 2 locations); and
5. A certification that the business shall not subcontract telecommunications wiring work to a person or business entity not having a business permit or a telecommunications wiring exemption issued by the Board.

8. The applicant understands that this exemption may be revoked by the Board of Examiners of Electrical Contractors, in accordance with the following paragraph (N.J.A.C. 13:31-1.17(i)):

- (i) After an opportunity to be heard pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., a telecommunications wiring exemption may be revoked on a showing that the exempt entity has engaged in the unlicensed practice of electrical contracting involving non-exempt electrical work; or that the exempt entity has a history of failure to pass local inspections or to obtain required permits; or for any reason which may serve as a basis to suspend, revoke or deny a license to engage in electrical contracting as more particularly set forth in N.J.S.A. 45:1-21 et seq.

AFFIDAVIT

This affidavit is to be executed by the applicant before a notary public:

State of: _____

County of: _____ ss.

_____, being duly sworn, says that he or she is the entity making application for the telecommunications wiring exemption. The applicant further stipulates that the statements contained herein are strictly true in every respect; that he or she has complied with all the requirements of the exemption; and shall take all measures necessary to ensure that the entity complies in all respects with the requirements and intent of the telecommunications wiring exemption.

Each application must be sworn to before a notary public or other authorized officer.

Name of business (If a corporation, give the exact legal title.)

Signature of owner or officer (Check one title below.)

- | | | | | |
|-----------------------------------|------------------------------------|------------------------------------|-----------------------------------|---------------------------------|
| <input type="checkbox"/> owner | <input type="checkbox"/> partner | <input type="checkbox"/> trustee | <input type="checkbox"/> receiver | <input type="checkbox"/> lessee |
| <input type="checkbox"/> executor | <input type="checkbox"/> president | <input type="checkbox"/> secretary | | |

Corporation Seal

Sworn to and subscribed before me this _____ day of _____, _____.

Month

Year

Signature of applicant

Name of Notary Public (please print)

My commission expires

Signature of Notary Public

Notary Seal

Application fee: Send only a certified check, postal money order or an express money order payable to the State of New Jersey, in accordance with N.J.A.C. 13:31-1.11. Please make sure that the application fee of \$120.00 is enclosed.